ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



SW-04265A
Woodruff Utility Company, Inc.
2555 E. Camelback Rd., Sto. 700 17207 N. PERIMETER DR. STEZOO
Phoenix, AZ 85016 Scotts Dale, AZ 85255

ATTENTION: MR. JON COULTER

RECEIVED #8

ACC UTILITIES DIRECTOR

ANNUAL REPORT Sewer

FOR YEAR ENDING

12 31 2009

FOR COMMISSION USE
ANNO5 09

4-26-10

COMPANY INFORMATION

Company Name (Business Name)	MODRUFF DTILM	OMPANY, INC.
Mailing Address 17207 N. Per	EIMETER DRIVE SUITE 2	
Samaric	(Street) ARAZONA (State)	95255
(City)	(State)	(Zip)
(480) 563 - 5247 Telephone No. (Include Area Code)	(480) 585-7803	
Nelephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address		- MAI
Local Office Mailing Address	SAME AS ABOUS (Street)	-
(City)	(State)	(Zip)
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address		
MA	NAGEMENT INFORMATIO	<u>DN</u>
□Regulatory Contact:		
Management Contact: 17207 N. PERIMETER December	4 P. COULTER DIRECT	DR OF CONSTRUCTION
	(Name)	(Title)
(Street)	PRIVE DUITE 200 Scot	TISDALE ARIZONA 85255 (Zip)
(480) 563-5247 Telephone No. (Include Area Code)	(480) 585-7803 Fax No. (Include Area Code)	(602) 228-3219 Cell Mo. (Include Area Code)
Email Address JPCed		·
January Marie Control of the Control	1/.	
On Site Manager:	Name)	
+ACILITY	, ,	
(Street)	(City)	. (State) (Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address		

Statutory Agent: DANID ES	THEIN ESQ CHES	TER 2 SHEIM PC				
Street) (Street) (Street) (Street) (Street) (Street) (State) (City) (State) (City) (State) (State) (Zip) (Zip) (ABO) 922-3969 Telephone No. (Include Area Code) (City) (State) (Zip) (ABO) 922-3969 (Street) (Street) (Street) (Street) (Street) (Street) (City) (City) (City) (State) (State) (Zip) (State) (Zip) (State) (Zip) (ABO) 922-3969 Telephone No. (Include Area Code) (City) (State) (City) (State) (City) (State) (Zip) (State) (Zip) (State) (Zip) (ABO) 922-3969 Telephone No. (Include Area Code) (Include Area Code) (City) (State) (Zip) (State) (Zip) (Zip)						
Check the following box that applies to your	Company:					
Sole Proprietor (S)	-	ner than Association/Co-op)				
Partnership (P)						
Bankruptcy (B)	Association/Co-op (A)					
Receivership (R)	Limited Liability Compa	nny				
Other (Describe)						
<u>CC</u>	DUNTIES SERVED					
Check the box below for the county/ies in wh	ich you are certificated to provide	service:				
П АРАСНЕ	COCHISE	☐ COCONINO				
GILA	☐ GRAHAM	GREENLEE				
LA PAZ	☐ MARICOPA	☐ MOHAVE				
☐ NAVAJO	☐ PIMA	⊠. PINAL				
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA				
☐ STATEWIDE						

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	
No.	DECRIPTION	Cost	Depreciation	O.C.L.D.
		(OC)	(AD)	(OC less AD)
351	Organization	\$ 4,288		\$ 4,288
352	Franchises	\$ 62,867		\$ 62,867
353	Land and Land Rights			
354	Structures and Improvements	\$ 9,600		\$ 9,600
355	Power Generation Equipment			,
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.		·	
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	\$76,755	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$ 76,755

This amount goes on the Balance Sheet Acct. No. 108 ____

CALCULATION OF DEPRECIATION EXPENSE

Acct.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
351	Organization	\$ 4,288		Ø
352	Franchises	\$ 62,867		Ø
353	Land and Land Rights	86 9,600	1.66%	\$ 160
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers - Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	\$76,755		\$ 160

This amount goes on the Comparative Statement of Income and Expense Acct. 403 -

BALANCE SHEET

Acct No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
110.	ASSETS	TEST YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 793	\$ 7,4-71
132	Special Deposits	80,857	81,866
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 81,650	\$ 89,337
	FIXED ASSETS	•	,
101	Utility Plant in Service	\$ 76,755	\$ 472,623
103	Property Held for Future Use		
105	Construction Work in Progress	393,978	Ø
108	Accumulated Depreciation – Utility Plant	(479)	Ø
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 470,254	\$ 472,623
	TOTAL ASSETS	\$ 551,904	\$ 561,960

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct No.	LIABILITIES	BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR	
	CURRENT LIABILITES			
231	Accounts Payable	\$ 437	\$ 0	
232	Notes Payable (Current Portion)	401	Φ Ψ	
234	Notes/Accounts Payable to Associated Companies			
235	Customer Deposits			
236	Accrued Taxes			
237	Accrued Taxes Accrued Interest			
241	Miscellaneous Current and Accrued Liabilities			
241	TOTAL CURRENT LIABILITIES	\$ 437	\$ Ø	
	TOTAL CURRENT LIABILITIES		Ψ Ψ	
	LONG-TERM DEBT (Over 12 Months)			
224	Long-Term Notes and Bonds	\$ Ø	\$ 08	
	2018		Ψ	
	DEFERRED CREDITS			
252	Advances in Aid of Construction	\$ 6	\$ Ø	
253	Other Deferred Credits			
255	Accumulated Deferred Investment Tax Credits			
271	Contributions in Aid of Construction			
272	Less: Amortization of Contributions			
281	Accumulated Deferred Income Tax			
	TOTAL DEFERRED CREDITS	\$ \$	\$ Ø	
	TOTAL LIABILITIES	\$	\$	
	CAPITAL ACCOUNTS			
201	Common Stock Issued	\$ 10	s Ø	
211	Other Paid in Capital	721.991	561,960	
215	Retained Earnings	(170,534)	Ø	
218	Proprietary Capital (Sole Props and Partnerships)			
	TOTAL CAPITAL	\$ 551,467	\$ 561, 960	
	TOTAL LIABILITIES AND CAPITAL	\$ 551,904	\$ 561,960	

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acet.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
No. 521	Flat Rate Revenues	\$ \(\forall \)	\$ Ø
522	Measured Revenues	\$ 0	3 W
536	Other Wastewater Revenues		
330			ф «
	TOTAL REVENUES	\$ Ø	\$ Ø
	OPERATING EXPENSES		
701	Salaries and Wages	\$ 55,799	\$ 0
710	Purchased Wastewater Treatment	1 33,172	
711	Sludge Removal Expense		
715	Purchased Power		
716	Fuel for Power Production		
718	Chemicals	<u> </u>	
720	Materials and Supplies		
731	Contractual Services – Professional	2,041	6
735	Contractual Services – Testing		¥
736	Contractual Services – Other		
740	Rents		
750	Transportation Expense	2,591	Ø
755	Insurance Expense		<u> </u>
765	Regulatory Commission Expense	5.184	5,000
775	Miscellaneous Expense	5.622	5,000
403	Depreciation Expense	320	160
408	Taxes Other Than Income	ı	
408.11	Property Taxes		_
409	Income Taxes	50	Ø
	TOTAL OPERATING EXPENSES	\$ 71,607	\$ 5,289
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$ 5.857	\$ 1.009
421	Non-Utility Income	1 1 1421	1000
426	Miscellaneous Non-Utility Expenses	1 60, 170)	44
427	Interest Expense		11791
741	TOTAL OTHER INCOME/EXPENSE	\$ (2.84)	\$ [15]
	TOTAL OTHER INCOME/EAPENSE	L LOI)	Ψ 11 <u>-1</u>
	NET INCOME/(LOSS)	\$ (71,893)	\$ (4,138)

COMPANY NAME WOODENFF	FOLITY COMPANY	INC.
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SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	Ø	Ø	Ø	∀
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	9/	0	% %	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

COMPANY NAME	MOODENFF	DTILITY	COMPANY,	INC.
Name of System:		Wastew	ater Inventor	y Number (if applicable):

WASTEWATER COMPANY PLANT DESCRIPTION TREATMENT FACILITY

TYPE OF TREATMENT (Extended Aeration, Step Aeration, Oxidation Ditch, Aerobic Lagoon, Anaerobic Lagoon, Trickling Filter, Septic Tank, Wetland, Etc.)	PHASE I SBR DESIGNED - NOT CONSTRUCTED -
DESIGN CAPACITY OF PLANT (Gallons Per Day)	PH 1 = 0.25 MGD; PH 2 = 1.5 MGD; PH 3 = 3 MGD

LIFT STATION FACILITIES

Location	Quantity of Pumps	Horsepower Per Pump	Capacity Per Pump (GPM)	Wet Well Capacity (gals)
	\$			
1				

FORCE MAINS

Size	Material	Length (Feet
4-inch		Ø
6-inch		Ø

MANHOLES

Туре	Quantity
Standard	Ø
Drop	Ø

CLEANOUTS

Quantity			
Ø			

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	MOODENFF	Uncim	COMPANY	Inc.		
Name of System:	•	Waste	ewater Invento	ry Numbe	r (if applicable):	

WASTEWATER COMPANY PLANT DESCRIPTION (CONTINUED)

COLLECTION MAINS

SERVICES

Size (in inches)	Material	Length (in feet)
4	NIA	
6	NA	
8	NA	
10	40	
12	NIA	
15	NIA	
18	NA	
21	NA	
24	AIN	
30	AIA	

Size		
(in inches)	Material	Quantity
4	NIA	
6	NA	
8	NA	
12	NIA	
15	NIA	Ì
, -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		

FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY PER WASTEWATER SYSTEM

SOLIDS PROCESSING AND HANDLING FACILITIES	MONE	
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	NONE	
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	NONE	
STRUCTURES (Buildings, Fences, Etc.)	NONE	
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.	MONE	

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	MOODRUFF	UTILITY COMPANY, INC.
Name of System:		Wastewater Inventory Number (if applicable):

WASTEWATER FLOWS

MONTH/YEAR (Most Recent 12 Months)	NUMBER OF SERVICES	TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY
January	Ø		
February	\$		
March	6	1	
April	Ø		
May	Ø		
June	Ø		
July	ď		
August	ø		
September	Ø		
October	Ø		
November	8		
December	Ø		

PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE PER WASTEWATER SYSTEM

Method of Effluent Disposal (leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	NONE
Groundwater Permit Number	NONE
ADEQ Aquifer Protection Permit Number	P-105597
ADEQ Reuse Permit Number	NONE
EPA NPDES Permit Number	NONE

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME: WOODRUFF	UTILITY	COMPANY,	INC.
Name of System:			ımber (if applicable):

<u>UTILITY SHUTOFFS / DISCONNECTS</u>

MONTH	Termination without Notice	Termination with Notice	OTHER
	R14-2- 609.B	R14-2- 609.C	
JANUARY	N/A	N/A	
FEBRUARY	NIA	NA	
MARCH	NA	NA	
APRIL	NA	NIA	
MAY	AIA	NIA	
JUNE	NA	NIA	
JULY	N/A	NIA	
AUGUST	A A	NIA	
SEPTEMBER	NIA	N[A	
OCTOBER	N/A	NIA	
NOVEMBER	N/A	NIA	
DECEMBER	NA	Ala	
$TOTALS \longrightarrow$	Ø	Ø	

OTHER (description):					

	····				
				· · · · · · · · · · · · · · · · · · ·	

COMPANY NAME WOODFUFF UTLITY COMPANY, LAZ YEAR ENDING 12/31/2009

INCOME TAXES

For this reporting period, provide the followi	ing:	
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability		
State Taxable Income Reported Estimated or Actual State Tax Liability		
Amount of Grossed-Up Contributions/Advar	ices:	
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances		
Decision No. 55774 states, in part, that the close of the tax year when tax returns are care due to any Payer or if any gross-up tinformation by Payer: name and amount of the amount of refund due to each Payer, and to the Payer.	ompleted. Pursuant to t tax refunds have alread contribution/advance, t	this Decision, if gross-up tax refunds dy been made, attach the following the amount of gross-up tax collected
<u>CERTIFICATION</u>		
The undersigned hereby certifies that the Uti in the prior year's annual report. This cert Officer, if a corporation; the managing gen limited liability company or the sole propriet	dification is to be signed neral partner, if a partner	by the President or Chief Executive nership; the managing member, if a
SIGNATURE	DATE	
PRINTED NAME	TITLE	<u> </u>

EXTENSION FILED

COMPANY NAME WOODENFF DTILITY COMPANY, NC. YEAR ENDING 12/31/2009

PROPERTY TAXES

\mathcal{L}
Amount of actual property taxes paid during Calendar Year 2009 was: \$
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.
If no property taxes paid, explain why. Woodfuff UTILITY COMPANY DWNS NO LAND.

VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED

VERIFICATION
STATE OF ARIZON A

I, THE UNDERSIGNED

OF THE

	ACC UTILITIES DI	RECTOR
COUNTY OF (COUNTY NAME)	MARICOPA	
NAME (OWNER OR OFFICIAL) TITE	E AUMORIZED FORT	
COMPANY NAME WOODEN FF UTIL	\cap	

<u>DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA</u> CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

SIGNATURE OF OWNER OR OFFICIAL

(480) 563-5247

TEDEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

145

DAY OF

MARICOPA

MONTH APRIL

.2010

(SEAL)

MY COMMISSION, ILOPSIRES PELL 6 2012

Notary Public - Arizona

Maricopa County

Expires 04/06/2012

ICNATURE OF NOTARY PUBLIC

VERIFICATION AND WORN STATEMENT

RE	CET	VED
		W.L. S.

SWORN STATEMENT Intrastate Revenues Only VERIFICATION ACC UTILITIES DIRECTOR COUNTY OF (COUNTY NAME) STATE OF ARIZONA MARICOPA NAME (OWNER OR OFFICIAL) TITLE AGENT I, THE UNDERSIGNED THORIZED COMPANY NAME OF THE NOODRUFF OMPANY, INC DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION MONTH DAY YEAR FOR THE YEAR ENDING 2009 12 31 HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY: THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. **SWORN STATEMENT** IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE **UTILITY OPERATIONS DURING CALENDAR YEAR 2009 WAS:** Arizona Intrastate Gross Operating Revenues Only (\$) (THE AMOUNT IN BOX ABOVE **INCLUDES \$** IN SALES TAXES BILLED, OR COLLECTED) **REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL) SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC IN AND FOR THE COUNTY OF COUNTY NAME LRICOPA THIS DAY OF 20 LD MONTH USA M. LOPEZ Notary Public - Arizona

TURE OF NOT

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

RECEIVE
NECETVE

VERIFICATION	INTRASTATE	REVENUES ON	ACC UTILITIES DIRECTO	
STATE OF ARIZONA	COUNTY OF (COUNTY NAME)	111		3 E
I THE INDEDCIONED	NAME (OWNER OR OFFICIAL)	MARICOPA	TITLE A	
I, THE UNDERSIGNED	COMPANY NAME	COULTER	AUTHORIZED AGEN	<u></u>
OF THE	Moode	NEE DTILL	TY COMPANY, INC.	
DO SAY THAT THIS ANNUA	L UTILITY REPORT	TO THE ARIZO	ONA CORPORATION COMMISS	SION
FOR THE YEAR ENDING	MONTH DAY	YEAR		
FOR THE TEAR ENDING	12 31	2009		
			I, FROM THE ORIGINAL	
		,	I I HAVE CAREFULLY EX. SE A COMPLETE AND CO	
STATEMENT OF	BUSINESS AND A	FFAIRS OF	SAID UTILITY FOR THE	PERIOD
			H AND EVERY MATTER ANI NFORMATION AND BELIEF.	
,		· · · · · · · · · · · · · · · · · · ·		
SWORN STATEMENT				
			TITLE 40, ARTICLE 8, SEC	
			EIN REPORTED THAT THE ED FROM ARIZONA INTR	
			SIDENTIAL CUSTOMERS	
CALENDAR YEAR	2009 WAS:			
ARIZONA INTRASTATE GROSS	OPERATING REVENUES		OUNT IN BOX AT LEFT	
\circ s \varnothing		INCLUD: IN SALE	ES \$ $\underline{\hspace{1cm} arphi}$ S TAXES BILLED, OR COLLECT	ED
<u> </u>				
*RESIDENTIAL REVENUE		PAGE		
MUST INCLUDE SALES	TAXES BILLED.		On P. Caulter	
			SIGNATURE OF OWNER OR OFFICIAL (ARA) 563-5247	
		_	TELEPHONE NUMBER	
SUBSCRIBED AND SWORN	TO BEFORE ME		NOTARY PUBLIC NAME LISA M. LOPE	2
A NOTARY PUBLIC IN ANI	FOR THE COUNTY O	F	COUNTY NAME MARICOPA	
THIS 4TH	DAY OF		монтн ,20	
(SEAL)			$\alpha \cap \alpha$	
LISA M. LOPEZ Notany Perf Oatly ALSS	ION EXPIRES		SIGNATURE OF NOTARY PUBLIC	
Maricopa County Expires 04/06/2012	APRIL 6,	2012_ () (Side of the second	_
— EMPICO 07/00/2012) 18
			<i></i>	10